

# HOW TO CHOOSE THE RIGHT PLACE

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A Guide to Services and Facilities  
for Older People in Ontario

Revised and Updated 1991



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Ministry of  
Citizenship


Office for

Senior Citizens' Affairs

In Partnership with

Ontario Association of Professional Social Workers

Ontario



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Ontario

Ministry of  
Citizenship

Office for  
Senior Citizens'  
Affairs



ONTARIO ASSOCIATION OF  
PROFESSIONAL SOCIAL WORKERS

L'ASSOCIATION DES TRAVAILLEURS SOCIAUX  
PROFESSIONNELS DE L'ONTARIO

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# 1

## WHO IS THIS BOOKLET FOR?

This booklet is for you:

- if you are finding the responsibilities of managing independently in your own home more than you can handle
- if you have begun to consider some other living arrangement
- if you have a relative or friend who needs to make some change in his or her living arrangement
- if you are a member of a helping/medical profession, working with elderly people
- if you are already in a care facility and want or need to make a change

The booklet provides information about:

- the services available in your community to help you maintain your present living arrangement
- facilities that provide various types of care
- helping you explore and make decisions as to what will best meet your needs

## 2

# HOW TO PLAN

Your decision to consider and explore a change in your living arrangements is often a difficult one to make, but you do not have to handle it alone. Keep in mind that the plan you decide upon must be based on your **needs**. Because it is important that any change you decide upon should be carefully planned, it is recommended that you and your family consult a counsellor who is experienced in working with older people.

## HOW TO FIND A COUNSELLOR

Your doctor, clergyman or Community Information Centre may be able to recommend a counsellor. There are a number of professional people who can help you plan, such as:

- a co-ordinator in your local Placement Co-ordination Service (PCS);
- a social worker in a geriatric centre or in a family counselling agency;
- a community health nurse (Public Health Nurse, Victorian Order of Nurses [V.O.N.], St. Elizabeth Visiting Nurses' Association);
- a hospital social worker or a discharge planning co-ordinator in your local hospital.

Choose a trustworthy person, someone who knows the services for the elderly in your community. You are the one who will make the decision, based on your needs.

## **WHAT THE COUNSELLOR WILL DO**

Your counsellor's first step will be to help you determine whether you are able to continue to live at home with Home Support Services and/or medical treatment. If you require more care than you can receive at home, the counsellor will help you obtain an assessment of your medical, physical, emotional and social needs - if you have not already received one. If possible, the medical part of your assessment should be done by a geriatric specialist or your family doctor.

Then the counsellor will help you access the services you need or find the facilities in your area that will provide you with the kind of care you require.

In meeting with you and your family, the counsellor will be able to help you in your step-by-step evaluation and planning. You will find it helpful to talk about the homes you have visited, weighing the pros and cons. It is hard to sit down and think by yourself. Everyone can use a person with whom to talk things over.

## **Placement Co-ordination Services (PCS)**

Placement Co-ordination Services (PCS) commenced in 1979 and are now available in 22 areas of the province. The service is totally funded by the Ontario Ministry of Health. Its main purpose is to provide a single channel to help people requiring placement in long-term medical care facilities obtain suitable accommodation and the most appropriate services. A central registry of all facilities in the area is maintained. Applications for placement into Nursing Homes and Homes for the Aged are channelled through this agency.



To find out if there is a Placement Co-ordination Service in your area, or for further information, contact:

**Program Co-ordinator  
Placement Co-ordination Services  
Community Health Programs Branch  
Ontario Ministry of Health  
15 Overlea Boulevard, 6th Floor  
Toronto, Ontario M4H 1A9  
Telephone: (416) 963-2789**

Here is a list of PCS as of January, 1990:

1. Algoma District Placement Co-ordination Service  
(Northeast) Telephone (705) 759-2491
2. Brant County Placement Co-ordination Service  
(Central West) Telephone (519) 759-3141
3. Chatham-Kent Placement Co-ordination Service  
(Southwest) Telephone (519) 352-5257
4. Cochrane District Placement Co-ordination Service  
(Northeast) Telephone (705) 267-1181
5. Durham Region Placement Co-ordination Service  
(Central East) Telephone (416) 433-2703
6. Eastern Counties Placement Co-ordination Service  
Telephone (613) 932-3681
7. Haldimand-Norfolk Placement Co-ordination Service  
Telephone (519) 587-4862
8. Halton District Placement Co-ordination Service  
Telephone (416) 847-6206
9. Hamilton-Wentworth Placement Co-ordination Service  
(Central West) Telephone (416) 528-1512
10. Kingston, Frontenac and Lennox and Addington  
Placement Co-ordination Service  
(Eastern) Telephone (613) 549-1232, ext. 255



11. Lambton County Placement Co-ordination Service  
(Southwest) Telephone (519) 336-0172
12. Leeds, Grenville & Lanark Placement Co-ordination  
Service (Eastern) Telephone (613) 342-8824
13. Manitoulin-Sudbury Placement Co-ordination Service  
(Northeast) Telephone (705) 671-1575
14. Niagara Placement Co-ordination Service  
(Central West) Telephone (416) 356-6171
15. Ottawa-Carleton Placement Co-ordination Service  
(Eastern) Telephone (613) 727-0132
16. Peel Regional Placement Co-ordination Service  
(Central East) Telephone (416) 791-9400, ext. 442
17. Thames Valley Placement Co-ordination Service  
(Southwest) Telephone (519) 663-0920
18. Thunder Bay Placement Co-ordination Service  
(Northwest) Telephone (807) 475-8013
19. Waterloo Placement Co-ordination Service  
(Central West) Telephone (519) 749-6789
20. Wellington Placement Co-ordination Service  
(Central West) Telephone (519) 824-5021
21. Windsor-Essex County Placement Co-ordination  
Service (Southwest) Telephone (519) 253-4211, ext. 13
22. York Region Placement Co-ordination Service  
Telephone (416) 836-9511

### 3

## SERVICES AVAILABLE

### SERVICES IN YOUR OWN HOME

#### Home Support Services

A wide variety of non-profit agencies, organizations, some Homes for the Aged and some municipalities provide services under this program to help seniors remain independent and in their own homes. The services are subsidized and the senior may be charged a reasonable fee. These services may include the following:

**Meals on Wheels and Wheels to Meals** programs provide wholesome mid-day meals. Special diets are available to the home-bound or are served in a centre for those who prefer to go out. These programs are available up to five days a week and in special cases on weekends as well.

**Home help services** provide assistance with light housekeeping duties.

**Handiman services** may provide assistance with home maintenance, heavy-duty cleaning, gardening and snow removal.

**Shopping services** provide either group transportation to a shopping centre, shopping from a list and delivery to the home, or shopping accompanied by a volunteer.

**Respite Care** provides short-term or temporary care in the home to allow caregivers of the frail elderly, needing constant supervision, some free time from family and responsibilities.

**Transportation** to medical and other essential appointments.

**Friendly visiting** where volunteers visit with seniors providing companionship and some assistance with small chores.

**Security Checks** are made through either regular visits or telephone reassurance.

**Intergenerational Programs** link seniors and young people who are willing to undertake specific chores such as snow removal, grass cutting etc. - for a nominal fee.

## **Elderly Persons' Centres**

Elderly Persons' Centres are operated by non-profit organizations or municipalities and are partly funded by the Government of Ontario. They offer varied programs which provide opportunities for socialization, recreation, educational and cultural activities and often incorporate some form of communal dining services. Many of these centres offer some of the home support services mentioned above.

There is also a wide variety of senior citizens' clubs run by various groups and organizations which offer similar social, recreational and educational opportunities.

## Public Health Services

Health units throughout Ontario provide public health services which assist seniors in maintaining optimum levels of health and independence, thereby enabling many seniors to remain in their own homes. These services are provided by a variety of health professionals such as nurses and nutritionists. The services include: group health education classes, health counselling, referral for appropriate health care and/or community services based on needs, and advisory services to families. To contact your Public Health Unit consult the Blue Pages of your telephone directory in the Municipal section under **Public Health**.

## Home Care Program

The Ontario Home Care Program provides co-ordinated delivery of a range of health-related services to eligible seniors in their own homes. This is a health insured benefit and, as such, there is no user fee for eligible clients.

There are two components to this program available province-wide: Acute Home Care, oriented to short-term active treatment, and Chronic (long-term) Home Care. The doctor applies for Home Care on behalf of the patient. Upon referral, a Home Care Case Manager will assess the patient for Home Care eligibility. For both of these programs, any combination of the required professional services such as visiting nursing services, physiotherapy, occupational therapy or speech therapy may be provided.

Additional auxiliary services may also be provided in conjunction with the required service(s). These are: medical, social work, nutritional counselling, visiting homemaker services, hospital and sick room equipment, transportation



and portable meals. These services are designed to help the patient become and remain as independent as possible.

Goals are established, with the patient and family, for each patient admitted to the program. They are designed to encourage patient independence and participation of the patient, family and others in the patient's care and rehabilitation. The Home Care team works together with the family to provide the necessary care and to promote the well-being of the patient.

Home Care staff will facilitate referrals to alternate sources of care for those patients referred who are not currently eligible for the program.

There are 38 programs administered by local boards, through out Ontario. For further information, ask your doctor, or call your local Home Care Program listed under **Home Care** in the White Pages of your telephone directory, or contact:

**Ontario Ministry of Health  
Community Health Branch  
Home Care Program  
15 Overlea Boulevard, 6th Floor  
Toronto, Ontario M4H 1A9  
Telephone: (416) 963-1364**

## **Integrated Homemaker Program**

To help improve existing community support services the Ontario Government introduced an Integrated Homemaker Program for frail seniors and disabled adults who need homemaker services to remain in their own homes. The provision of homemaker services for the frail elderly and

adult disabled persons is based on the **need** for service rather than financial or medical criteria.

The Integrated Homemaker Program is presently established in 18 locations. The program is funded by the Ministry of Community and Social Services and delivered through existing Ministry of Health - Home Care Programs. A homemaker, under the Integrated Homemaker Program, goes into a person's home to provide basic services such as housekeeping, help with washing, dressing, grooming or other personal matters, cooking, laundry and marketing.

For further information call your local Home Care Program as listed under **Home Care** in the White Pages of your telephone directory, or contact the Ontario Ministry of Community and Social Services office in your area.

## **Homemakers and Nurses Services Program**

Under this Program homemakers and nurses will visit elderly, physically disabled or convalescent persons so they can remain in their homes instead of going to a hospital or other institution.

Homemakers may prepare meals, shop, do laundry, house-keeping, heavy cleaning, or provide personal care services such as washing, dressing and grooming. Nurses provide health care. These support services are administered by the Social Services Departments of local municipalities, and Indian Bands, which may use their own nurses or homemakers, or the services of agencies such as the Victorian Order of Nurses, the St. Elizabeth Visiting Nurses' Association, the Canadian Red Cross Society and the Visiting Homemakers Association.

Payment for these services is according to the client's ability to pay. There are no residency requirements except that you must live in the municipality where you apply for the service. Part of the funding for this program is provided by the Ontario Ministry of Community and Social Services.

For further information, contact your local municipal Social Services office, or the nearest Area Office of the Ontario Ministry of Community and Social Services (see the Blue Pages of your telephone directory).

## **Purchasing Homemaking and Nursing Services**

There are also agencies that people can contact to purchase services. They include the following:

- Visiting Homemakers Association (V.H.A.)
- Canadian Red Cross Society
- Victorian Order of Nurses (V.O.N.)
- Home Support Voluntary Organizations (see page 6)

Light housekeeping services and some personal care are available, usually on a part-time basis and with fees adjusted to ability to pay.

Victorian Order of Nurses (V.O.N.) and St. Elizabeth Visiting Nurses' Association provide nursing care in the home including administering medication, bathing, foot care, and respiratory monitoring. A medical referral is preferable.

Live-in or live-out homemakers and nurses are available on a commercial basis, at a set fee. This is an expensive service but if you can afford it, it may be the arrangement you would

choose. If you have a private insurance policy, check it to see whether you are covered for nursing care at home.

These services can be found in the Yellow Pages under **Homemaker Services**. Costs for full-time homemaking services can sometimes be considered as a medical expense for income tax purposes. Revenue Canada should be consulted about this.

## **Assistive Devices Program (ADP)**

The Assistive Devices Program is a branch of the Ontario Ministry of Health which provides financial assistance for the purchase of certain medically necessary equipment to people with long-term physical disabilities (e.g. hearing aids, supplies, wheelchairs, walkers etc.) ADP will pay for 75 percent of the cost of the device, with the individual responsible for the other 25 percent. If the individual cannot pay the 25 percent, assistance is available through government or volunteer agencies. ADP may be contacted by dialing:

**(416) 963-1956 (Metro Toronto area)**  
**1-800-268-6021 (toll-free, province-wide)**  
**1-800-268-6023 (TDD - Telephone Device for the Deaf)**

## **Emergency Response Systems**

Emergency Response Systems are now available in many regions. These provide reassurance to those who are worried about obtaining help in an emergency when a phone cannot be reached. By wearing a small transmitter with a pushbutton, connected to a 24-hour response centre, a



person can summon help immediately. See the Yellow Pages under **Medical Alarms** or consult your counsellor.

## **Transportation**

Many communities provide specialized transportation for those unable to use public transportation. These services may be provided by public transport systems or by volunteer groups. (Also see Home Support Services - pages 6 and 7.)

## **Veterans Independence Program**

### **What it is**

This program assists veterans to remain as independent as possible while living in their own homes or communities. Under certain conditions, the following types of care may be provided: ambulatory health care, home adaptations, home care, transportation, adult residential care and nursing home intermediate care.

### **Who is eligible**

- War disability pensioners or civilian disability pensioners whose long-term health needs are related to their pensioned conditions;
- Veteran War Veterans Allowance (WVA) recipients 65 years of age and older;
- Veterans who would be receiving WVA if they or their spouses were not receiving payments under Old Age Security (OAS) legislation;
- Someone 65 years of age or over who served at least 365 days during the First or Second World War in Canada or in

Newfoundland as full-time active members of the Canadian Armed Forces or of forces recruited in Newfoundland.

## **How to Apply**

Contact the nearest Veterans Affairs District Office listed in the Government of Canada section of the Blue Pages in your telephone directory. Or, in Toronto, call 226-5226. From area code (807), dial 1-800-387-0930. From area codes (416), (519), (613) and (705), dial 1-800-387-0919.

## **Adult Day Care Centres**

These centres are often attached to a Home for the Aged where you can attend two or more days a week, have one or two meals a day, and take part in crafts and group activities. Transportation may be available.

## **Day Hospitals**

These are often attached to chronic care hospitals. You will receive the nursing, medical and therapeutic services prescribed by your doctor. This is usually a short-term plan, with a definite treatment goal. Once these goals are achieved you no longer attend.

## **Vacation Care/Respite Care**

Many Retirement Homes, Homes for the Aged, Nursing Homes and Chronic Care Hospitals will provide vacation and respite care for a period of two to four weeks. You may use

this service when your relatives will not be available for a temporary period and you cannot be left alone. It is necessary to apply well in advance, especially if exact timing is necessary. Some respite care services require a fee. (Also see Home Support Services - pages 6 and 7.)

## **Resources**

A number of organizations provide education and support to individuals with specific health problems and their families. For example:

**Alzheimer Society of Ontario**

**Arthritis Society**

**Canadian Hearing Society**

**Canadian National Institute for the Blind**

**Parkinson Foundation of Canada**

**Stroke Recovery Association**

Contact your community health nurse, local Placement Co-ordinator Service (PCS) or your local Community Information Centre for information about other specific resources.

## SMALLER SPACE BUT MORE FREEDOM

If you find your house or apartment is using too much of your energy and has become more than you can cope with, you may want to move to a smaller place but still carry on as you usually do. There are several options that you may choose.

**Senior Citizens' housing apartments**, self-contained bachelor and one-bedroom apartments. Some have support services such as meals available in a common dining room, or a nurse who will visit in an emergency.

**Apartment hotels**, operated by the private sector, where meals and housekeeping services may be purchased or not, as you wish.

**Boarding homes**, operated by the private sector, where rental includes accommodation and meals.

There is no provincial government licensing or government inspection, other than fire regulations, of apartment hotels and boarding homes. Building codes, fire and health regulations are enforced at the local level. Some municipalities license and regulate boarding homes. Check your local municipality for details.

### Ontario's Home Sharing Program

This is a practical housing service which attempts to match homeowners/renters with excess space in their homes with compatible persons interested in becoming part of a shared household. Each person has his or her own private room and shares the rest of the common living space such as the living room, bathroom and garden. There is one prerequisite: you should be prepared to share a home, not just a house.



Homesharing provides companionship and security and may include an exchange of services, where the person who shares with you would help with cleaning, shopping or other services in exchange for reduced costs. A home sharing arrangement can offer additional comfort, enjoyment, and social and financial security. For further information about the Home Sharing Program, contact:

**Ontario Ministry of Housing  
Social Housing Programs Branch  
777 Bay Street, Toronto, Ontario M5G 2E5  
Telephone: (416) 585-6433**

**Moving in with a family member** can be a satisfactory plan if it is thoroughly thought out and agreed to by everyone concerned. The issues which should be discussed before such a move include:

- Who will provide what services for whom, e.g. cooking, housework, child care, personal care, etc.?
- What will the financial arrangement be?
- What will happen when the family goes on a holiday?
- What are the arrangements for privacy and entertaining friends?

## WHEN YOU NEED MORE CARE

There are four types of facilities, each providing a different level of care to meet your need for more care than you can get at home. If there is a PCS in your area, all referrals to Long-term Care should be made through it.

1. **Retirement Homes - residential care**
2. **Homes for the Aged - residential care and extended care**
3. **Nursing Homes - extended care**
4. **Chronic Care Hospitals - hospital care**

### Continuity of Care

There are times when no one wants to look too far into the future, but when you enter a residence feeling well and able to look after yourself, it is good planning to find out whether continuity of care will be there for you when you need it. What will happen if you should begin to need more care? Will you have to leave, or is there a section where you can be looked after? Some private Retirement Homes are part of a chain which also operates Nursing Homes, nearby or at a distance. This makes the move from one to another relatively simple.

If you are considering a Retirement Home that provides care for the well elderly only, you should be aware that some time in the future you may have to begin the process of finding alternate arrangements. Even if you are exploring Retirement Homes and Homes for the Aged, ask whether they will provide on-going care if you should ever need it.

## 1. Retirement Homes

The term **Rest/Retirement Homes** refers to a wide variety of settings, operated primarily by the private sector, ranging from facilities offering residential care with minimal supervision to luxury retirement complexes offering extensive personal care and recreational activities.

A Retirement Home may be the right place for you when you feel ready to give up the responsibility of keeping house, while you are still able to care for your personal needs. It will enable you to be involved in your usual activities, keep in touch with your friends, but at the same time, have some or all of your meals prepared for you, with no housekeeping responsibilities.

**Health Care.** You will not receive nursing care, but in most Retirement Homes medication assistance is available. In certain circumstances, residents may be eligible through the Ontario Home Care Program for services such as physiotherapy and occupational and speech therapy. You may continue to use your own family doctor, if he or she agrees, or you may use the doctor attached to the Retirement Home. Most retirement facilities also provide 24-hour security and emergency services.

**Physical Facilities and Food.** Rooms may be private, semi-private or standard (three or more in a room), with private or shared bathrooms. They are furnished but you can usually bring in some of your own furniture. Some homes provide three meals a day, others provide the main meal only but, in that case, there will be kitchen facilities in your room for breakfast and lunch. You can usually invite family and friends for a meal in the dining room. Except for emergencies, meals are not served in your room, although the service can often be negotiated as an "extra". Some

Homes will do your personal laundry; others provide washers and dryers for your use.

**Social and Recreational Activities.** These may differ from Home to Home. In some Homes there may be a varied program; in others, there may be very little organized activity.

**Costs.** Most Retirement Homes are owned and operated by the private sector. The cost is paid entirely by the resident (see Satellite Programs - page 22). Generally Rest and Retirement Home residents pay the full cost of their accommodation and services. A resident contract should be made available to you which may include items such as:

- What your monthly rate includes;
- How often rate increases will be introduced (beware if it's more than annually);
- How much notice is needed if you should decide to leave or be asked to leave.

For further information about the rest and retirement industry including residents' contracts, contact:

**Ontario Long Term Residential Care Association**  
**2857 Sherwood Heights Drive**  
**Unit 3**  
**Oakville, Ontario L8J 7J9**  
**Telephone: (416) 829-2999**

## **2. Homes for the Aged**

Homes for the Aged are long-term care facilities for those seniors who are unable to remain at home with the



assistance of family, friends and community-based services. Homes for the Aged are operated by local governments or charitable organizations and are funded by the Ontario Ministry of Community and Social Services.

Some Homes for the Aged provide only residential care so that you will have to move when you need more care than they are equipped to give. Some will only admit the well aged but have an extended care section to which their residents can move when it is needed. Other Homes for the Aged will admit those who need both residential care and extended care. Many Homes can offer short-term care, respite and vacation care, and some offer accommodation and support in smaller, home-like satellite programs. In addition, many Homes for the Aged offer day programs, and other community support services.

**Health Care.** All Homes offer residential care for residents who require less than 1 1/2 hours of direct nursing and personal care daily, and most offer extended care services for those residents who require in excess of 1 1/2 hours of care daily. Physiotherapy and occupational and speech therapy can be arranged as required through the Ontario Home Care Program. Mechanical aids, nursing and medical supplies and standard grooming articles are provided. Doctors attached to the Home visit regularly, but you may continue to use your own doctors, if they agree.

**Physical Facilities and Food.** Rooms may be private, semi-private or standard (three or four beds in a room). Bathrooms may be private but are usually shared. You may be able to bring lamps, a chair or other small furniture. Meals, including special diets prescribed by your doctor, are usually served in a dining room, except for emergencies. Personal laundry and, in some homes, dry cleaning services are usually available.

**Social and Recreational Activities.** Most Homes for the Aged have an extensive program of activities, under the direction of a staff person. These activities include entertainments, outings to concerts, picnics and plays, arts and crafts, bingo etc.

**Costs.** Fees vary from Home to Home; many Homes adjust the fee in accordance with your income and assets. Once admitted, you will continue to receive care, even if your assets become exhausted. Facilities may assess an estate after the death of a resident where assets or property are involved. Make sure you are informed about this policy.

In the nursing care section (extended care), you pay the difference between the full fee for a standard ward and the payment made by the Extended Care Insured Service (see page 25). This is the same co-payment paid by residents of a Nursing Home. The charges for private and semi-private rooms are extra.

**Comfort Allowances.** Any resident, whose only source of income is the full Old Age Pension (including the Guaranteed Income Supplement [GIS] and the Guaranteed Annual Income System [GAINS]) is entitled to a monthly comfort allowance to cover personal expenditures. You will be responsible for personal clothing, tobacco and alcohol, private transportation, private recreation, private telephone, radio and TV.

**Satellite Programs.** Some Homes for the Aged have a satellite program in which residential care is offered to appropriate applicants in a home setting other than the Home for the Aged itself. These homes include boarding homes and private homes, while others are retirement

homes. Contact your local Home for the Aged to see if this program is available in your community.

For further information concerning Homes for the Aged in your community, contact the nearest Area Office of the Ministry of Community and Social Services (see the Blue Pages in your telephone directory).

### 3. Nursing Homes

Nursing Homes are privately run facilities, licensed by the Ontario Ministry of Health, for people who need greater nursing care than can usually be provided at home, but who do not need hospitalization.

Most Nursing Home patients are eligible for the Ontario Ministry of Health's Extended Care Program for people who need, on average, at least 1 1/2 hours of nursing and personal care a day.

Nursing Homes are either commercially owned and operated (individually or as part of a chain) or non-profit, operated by religious, cultural or charitable organizations.

Nursng Homes are licensed and inspected by the Ontario Ministry of Health. Every Nursing Home must post, or make available, its annual relicensing inspection report. These reports for all Nursing Homes are available to the public at the Ministry of Health Library.

**Health Care.** According to your needs, help is available for eating, bathing, dressing, toileting and walking. Twenty-four hour nursing supervision is provided in all Nursing Homes. Wheelchairs and walkers are available in some Homes. Physiotherapy and occupational and

speech therapy can be arranged as required on a doctor's referral, through the Ontario Home Care Program. Some nursing, medical and grooming supplies are provided.

**Physical Facilities and Food.** Rooms may be private, semi-private or standard (three or more beds in a room). Bathrooms are usually shared. You may bring some small furniture of your own, such as a lamp, a chair, for example. Meals, including special diets prescribed by your doctor, may be served in a dining room, or on trays in a lounge area. Personal laundry is provided.

**Social and Recreational Activities.** Nursing Homes vary in the type and extent of activities they provide to try to keep people active and independent. All homes have an activities director.

**Costs.** Basic charges are the same for all Nursing Homes throughout Ontario. A Nursing Home operator receives a set fee for the care of each resident. This fee is called a per diem and is established annually through legislation. A Nursing Home operator by law is not permitted to charge fees in excess of the per diem for services that are insured under the Extended Care Program.

The total per diem is made up of the resident's portion or co-payment, and the government portion.

Insured services under the Extended Care Program include medical and nursing care, accommodation charges, cleaning and upkeep of rooms etc., so that all basic needs are provided for. Residents occupying private or semi-private rooms pay an additional charge. The costs of private nurses and personal attendants are also the responsibility of the resident.



You will be responsible for personal clothing, including repairs and dry cleaning, drugs not covered by your drug benefit card, dental and eye care, tobacco and alcohol, private recreation, transportation, telephone, radio and TV. You may choose to receive extra services (for example, hairdressing, or ironing and mending) if available in the Home, for an additional fee if you agree in writing to receive the service. There may also be some additional costs, so you should enquire about these.

A list of Nursing Home addresses may be obtained from:

**Ontario Ministry of Health  
Nursing Homes Branch  
15 Overlea Blvd., 5th Floor  
Toronto, Ontario M4H 1A9  
Telephone: (416) 963-1038**

## **Extended Care Program**

Under the Extended Care Program, a resident in a Nursing Home or Home for the Aged contributes a portion of the cost of his or her room and board and the remainder is paid by the Ontario Government. The resident's rate of payment is adjusted on a quarterly basis.

You may qualify for this program if you are insured under the Ontario Health Insurance Plan (OHIP) and require at least 1 1/2 hours of skilled nursing and personal care a day.

Please discuss your need for the program with a physician. He or she will complete an application form on your behalf.

Application forms may be obtained from Ontario Ministry of Health offices, hospitals, doctors' offices, Nursing Homes, Homes for the Aged, and Placement Co-ordination Service Centres.

A walk-in service is available in downtown Toronto at:

**The Toronto Public Inquiry Service**  
**50 Grosvenor Street**  
**Toronto, Ontario M5S 2V3**  
**Telephone: (416) 963-2761**

You may make photocopies of the form to use when you apply to any Home. The form must be renewed every six months. When your extended care application is approved, you will receive a Certificate of Eligibility which you give to the Nursing Home when you are admitted. OHIP will then pay part of the daily rate directly to the Nursing Home or Home for the Aged. You pay the balance which for a standard ward is always less than the combined pensions of Old Age Security (OAS), Guaranteed Income Supplement (GIS) and Ontario Guaranteed Annual Income System (GAINS). Even if your only income is from these government pensions, or is an equivalent amount, there will be enough to pay the resident's share of the daily rate and have some money left over for your personal use. Charges for private and semi-private rooms are in addition, and are paid by you or your family.

If you have private medical insurance, check with your insurer to see whether any of the costs in the Nursing Home are covered. For further information, contact:

**Ontario Ministry of Health  
Finance and Accounting Branch  
Nursing Homes Unit  
15 Overlea Boulevard, 3rd Floor  
Toronto, Ontario M4H 1A9  
Telephone: (416) 965-1506**

#### **4. Chronic Care Hospitals**

Care in a hospital can be either for an acute short-term illness or for a long-term chronic illness or disorder. When a person requires care as an inpatient for a chronic disorder for a long period of time and this care includes the need for regular frequent care by skilled professional, then this care is provided in hospital in a chronic care bed.

Under this program, after 60 days, the patient contributes toward the cost of his/her room and board. The cost of health care is paid by the Ontario Government. The patient's contribution (the co-payment) for room and board is adjusted on a quarterly basis. However, there are a few exemptions to the requirement for co-payment.

Further information on chronic care, the co-payment and exemptions is available in the booklet **Sharing the Cost of Chronic Care** available through your local hospital or from:

**Ontario Ministry of Health  
Health Information Centre  
Hepburn Block, 9th Floor  
Queen's Park  
Toronto, Ontario M7A 1S2  
Telephone: (416) 965-3101  
or toll-free, 1-800-268-1153, 1-800-268-1154**

## 4

# FINDING THE RIGHT PLACE

## WHAT TO LOOK FOR

With the help of a counsellor, social worker, nurse or other informed person, select two or three Homes that might meet your needs, preferably in the neighbourhood of your choice. It is essential that you and your family then visit them. You should arrange an appointment to talk to the administrator or director of care (sometimes called the director of nursing) and to tour the Home.

There are four aspects of living in a Home that will help you to decide whether it is the right place for **you**:

- Health care provided
- Physical facilities and the food
- Quality of life
- Administrative policies.

You will gain much information from careful observation and your own intuition. Do not hesitate to ask questions for factual information, and make notes.

**Health Care.** Residents in Nursing Homes and Homes for the Aged must be under medical supervision at all times, either by the doctor associated with the Home, or by a family doctor. Only the doctor can order medication, laboratory tests, special diets, therapies or transfer to a hospital.



Enquire about:

- How readily available is the Home doctor? Is he or she on 24-hour call?
- Is the doctor's name and phone number given to you and your family?
- If you need increased health care, will you and your family be consulted?
- Are physiotherapy and occupational and speech therapy arranged for as needed?
- Under what circumstances would you be required to provide personal attendants at your own expense?

**Physical Facilities and Food.** Observe if the dining room and residents' areas are bright, attractively furnished and well maintained. Watch for such safety measures as handrails, non-skid floors, ramps, comfortable furniture and well-marked exits.

Food is an important part of living, both socially and nutritionally; it should be appetizing and attractively served. Everyone who is physically able should eat in the dining room rather than in a bedroom or corridor.

Make a list of such questions as:

- Can you bring your own furniture? If so, how much?
- Is room service available when necessary?
- Is there a qualified dietician?

- Are special diets available?
- Can gifts of food be brought in by family and friends?

Ask to see a week's menu. Is there a choice? Get yourself invited to a meal, if possible.

**Quality of Life.** Do you sense an atmosphere of warmth and concern, as well as friendliness between staff and residents? Do staff appear to treat residents with dignity and respect? Do they seem interested in you as a person? The quality of the nursing care provided will definitely influence your feeling of well-being, so it is important that you talk to the director of nursing and ask about everything you want to know.

Make a list of questions such as these:

- Is there an activity director? What social activities and recreation programs are there? Are activities provided for confused or bed-bound residents? Are family members invited to participate in activities?
- Will the staff involve you and your family in planning your care and progress?
- Is there reasonable access to shopping and recreational activities?
- Is there a volunteer program? Are family members invited to participate as volunteers?
- Is there an active Residents' Council?
- Who is the staff member you go to if you have a problem?

- Are there provisions for meeting your religious needs?
- Are there others (staff, residents, volunteers) who speak your language?

**Administrative Policies.** How does the administrator respond to your questions? Is he or she willing to share information? Were you encouraged to explore and ask questions of residents and staff?

There is a trend toward accreditation of Nursing Homes and Homes for the Aged, similar to that of hospitals. Not all Homes are accredited, as application for accreditation is voluntary. It is therefore a good idea to inquire whether the Home you are considering is accredited and for how long.

Make a list of questions to include the following:

- Who is responsible for the operation of the Home - a private owner, a religious or charitable organization, or the municipal government?
- What are the rates? Are they subsidized if necessary? Are there additional costs? Are itemized accounts issued regularly?
- If you are asked to transfer to another room, are you and your family notified first?
- What are the rules and regulations about hours, visitors, children, vacations, alcoholic beverages, smoking? Is there a brochure about the rules?
- What are the arrangements for personal laundry? Are there additional charges?

- What are the arrangements for safe-keeping and/or storage of personal belongings?

Eventually you will decide that one of the Homes you have visited best meets your needs. But remember, no single one will always satisfy all your hopes. Each will have some positives and some negatives. Making the final selection is difficult, but it will be easier to make if you have considered all the options open to you. Talking them over with your counsellor - what you like and don't like, what is possible and is not possible, will help you arrive at the decision that is right for you.

## **The Waiting List**

You will find that most care facilities have extensive waiting lists, but they manage them in different ways. In many localities in Ontario, the Placement Co-ordination Service (PCS) maintains up-to-date waiting lists for all facilities in order to adhere as closely as possible to the first come, first served approach. In other areas where there is no PCS, very few facilities operate on a first come, first served basis, and it is essential that you keep in touch. However, the waiting time may sometimes be shorter than you expect.

Senior citizen apartments and apartment hotels will put your name on a waiting list and notify you when they have a vacancy.

Many Retirement Homes, Nursing Homes and Homes for the Aged have long waiting lists - it is important that you keep in touch with them. It is a good idea to take the name of the staff member who will be your contact, and keep in touch with that person regularly, to let him or her know you are still waiting for admission to their facility. The Home should be informed



if you no longer need admission and/or have made other arrangements.

Many Nursing Homes will not usually consider you on their active waiting list until you have a Certificate of Eligibility for Extended Care (see page 26).

If the facility of your choice does not have a vacancy when you urgently need it, ask them if they will accept your transfer from another Home when they have a vacancy. If you have applied to a Home as insurance for the future, and you are offered admission before you are ready, ask that your name be kept on the waiting list until you really need admission. You do not have to give up your own home prematurely.

Chronic Care Hospitals often have lengthy waiting lists, depending on their geographical location, so keep in touch with them. Their waiting lists consist of seriously ill people living at home and patients transferring from acute care hospitals, Nursing Homes or Homes for the Aged.

## **5**

# **SPECIAL NEEDS**

Sometimes there may be special circumstances that make finding the right place to live even more difficult. Two people may want to continue living together as they have always done, even though one may need more care than the other. A person suffering from profound confusion and loss of memory will need a special level of care from experienced staff.

### **A. COUPLES**

Most facilities will admit couples when both people need the same level of care, but you may have to wait until a two-bedded room becomes available. Sometimes one person may have to be admitted before the other.

When one partner needs more care than the other, look for a Home that combines both residential and nursing care in the same building or an adjoining building. In either case it will be possible to spend most of your time together every day. Sharing the same room is more difficult to arrange, but some Retirement Homes will accommodate you providing you can afford to pay for a personal attendant for the partner who needs more care.

When a couple, or two friends or relatives, have been sharing their living costs, and one partner has to be admitted to a Home, it may mean a financial hardship for the person left to maintain the shared home alone. A counsellor may be able to discuss a financial adjustment with the hospital or non-profit Home, or suggest an alternative plan.

## B. SPECIAL SUPERVISION

Some Homes for the Aged and Nursing Homes will accept persons who are confused or suffer from memory loss, and who need additional supervision and help. Many Homes have programs to help people remain as independent and alert as possible. Some Homes are better equipped than others to provide supervision and extra help for people who may wander out of the building.

## C. POWER OF ATTORNEY

Many people as they become older find it advisable and helpful to give **Power of Attorney** to a trusted relative or friend.

What is Power of Attorney? A Power of Attorney is a document by which you, the donor, give someone the power to act as your agent and do any legal act on your behalf dealing with finances or property but not your person. That is, it does not include the power to give consent to your medical treatment. You do not give up your power to continue to act for yourself, but share this power with your "attorney".

You may revoke the Power of Attorney at any time without the attorney's consent, or you may specify that the power expires at a certain date. (The Power of Attorney ceases with the donor's death.)

A Power of Attorney may be general or it may be specific. For example, if you want the Power of Attorney limited to banking transactions, it should specifically state that. If the document does not specify restrictions, your attorney has a general power to sign your name in a variety of situations, such as contracts, or buying and selling goods and property.

Your attorney is obligated to act on your behalf for your benefit and not for personal gain, and to account to you for his or her actions in using the Power of Attorney, and for all funds expended.

The donor must be mentally competent when he or she grants a Power of Attorney and must fully understand what the Power of Attorney is, and the consequences of giving it. A Power of Attorney may continue after the donor becomes mentally incompetent if it includes a clause specifying that the donor wishes the attorney to continue. The Power of Attorney may also specify that the donor wishes the attorney, rather than the Public Trustee, to continue to act on the donor's behalf. (Donors who signed a Power of Attorney prior to 1983 should review it if they wish their attorney to act on their behalf should they become mentally incompetent.)

As you will realize, a Power of Attorney is an important and powerful document which must be witnessed by someone other than the appointed attorney or his/her spouse. If you have any questions or concerns, do not hesitate to consult a lawyer before signing it. If you do not have a lawyer, consult your local Community Information Centre, Senior Citizens' Centre or Public Library about legal clinics in your area. Power of Attorney forms are available in law offices and in stationery stores that provide legal forms.



## 6

# AFTER YOU MOVE IN

Even if you have participated in choosing your new Home, it will probably take time to become used to it. Change is difficult. No place will be like your own home and therefore some adjusting and compromising will be necessary. However, it can also be a time of new beginnings, new friends, new interests.

If a problem arises it is best if you and/or your family solve it before it becomes a crisis. Where necessary you may wish to discuss it with your counsellor. If the nursing care is the problem, discuss it with the director of care. The Administrator of the Home is the person to see about any other problem or need that may arise after you move in. Hopefully, you will be able to come to a mutually satisfying decision.

However, if your serious and legitimate complaints are not solved in this way, there are services available to act on your behalf.

**Advocacy Centre for the Elderly (A.C.E.)**  
**120 Eglinton Avenue East, Suite 902**  
**Toronto, Ontario M4P 1E2**  
**Telephone: (416) 487-7157**

This is a service funded by Legal Aid, administered by a community board of directors composed of people over 65 and other concerned persons. This advocacy service acts on your behalf by providing legal advice over the phone, or by appointment in their office, or by visiting you in your own home or the facility where you are living, if a health problem

prevents you from going to their office. Although services are primarily for low income older people in Metro Toronto, A.C.E. has a flexible policy and, if they cannot assist you themselves, they will make every effort to link you up with someone in your area. Check to see if there is a community legal clinic in your area.

## **Residents' Councils - "You have a voice"**

Homes for the Aged, Nursing Homes, Retirement Homes and Chronic Care Hospitals have active councils or committees where every resident has the opportunity to participate and thus have an influence on the quality of life in the Home. The purpose is to encourage an exchange of ideas, suggestions and concerns regarding all aspects of care and activities in the Home and to enhance relations with staff and volunteers.

## **"A Transfer is Possible"**

It may happen that you find yourself in a facility (Home for the Aged, Nursing Home, Retirement Home, Chronic Care Hospital) that does not match up with your expectations, and you may wish to transfer to another facility. There are ways you can explore this possibility, e.g., through family and friends, through the administrative office of your present facility or through a counsellor. It may take time but it can be done.

## EVALUATION FORM

Please complete the attached evaluation form so that we may plan for future publications.

### 1. Did you use this booklet as:

- |    |  |              |
|----|--|--------------|
| a) | a Senior Citizen seeking accommodation or a special service . . .                            | Yes___ No___ |
| b) | a relative or friend of a Senior Citizen in need of accommodation or a special service . . . | Yes___ No___ |
| c) | a professional, e.g. Doctor, Social Worker, Nurse, assisting a Senior Citizen . . .          | Yes___ No___ |

### 2. Where did you get this booklet? (please tick)

- |    |                              |     |
|----|------------------------------|-----|
| a) | Community Information Centre | ___ |
| b) | Doctor's office              | ___ |
| c) | Local government agency      | ___ |
| d) | Hospital                     | ___ |
| e) | Other                        | ___ |

### 3. Was this booklet helpful? Yes\_\_\_ No\_\_\_

### 4. Is there additional information you would like to see in a future booklet?

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### 5. Comments:

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Thank you for your assistance. Please return this evaluation form to:

**Office for Senior Citizens' Affairs**  
**Education Resources**  
**76 College Street, 6th Floor**  
**Toronto, Ontario M7A 1N3**  
**Telephone: (416) 327-2460**





# NOTES

# NOTES

## **Special Note:**

New legislation and programs may affect some aspects of this booklet, although every effort has been made to ensure that the information contained is accurate at time of publication. We hope you will find the booklet helpful in planning a comfortable and satisfying future.

To order additional copies, please contact:

**Office for Senior Citizens' Affairs**  
**76 College Street, 6th Floor**  
**Toronto, Ontario M7A 1N3**  
**Telephone: (416) 327-2422 or 1-800-267-7329**

This publication is also available in French.

**Ce guide est aussi publié en  
français sous le titre de  
"Comment choisir le bon endroit  
pour vivre"**

